

## Roof Replacement Permit Application

Date Received:

Job Address			Suite
Property Owner/Tenant Name			Phone
Contractor Name			Phone
Address	City/State	Zip	Alt. Phone

☐ Commercial ☐ Residential ☐ Other

Description of Work

Value of Work \$\$

Quantity	Description	Fee Each	Fee
	Residential Roof	\$50.00	
	Commercial Roof	\$\$ Based on Value	
Total			\$ -

- Some neighborhood associations may restrict certain materials.
- Please check with your association before submitting application for roof replacement.

The issuance or granting of a permit shall not be construed to be a permit for, or an approval of, any violation of any of the provisions of this code or of any other ordinance of the City of Bedford. Permits obtained shall not give authority to violate health and safety violations. The issuance of a permit based on construction documents and other data shall not prevent the building official from requiring the correction of errors in the construction documents and other data. I have read the completed application and know the same is true and correct and hereby agree that if a permit is issued all provisions of the City Ordinances and State Laws will be complied with whether herein specified or not. I agree to comply with all property restrictions. I am the owner of the property or the duly authorized agent.

- ☐ Submit application and pay by cash, check or credit card in person.
- ☐ One time charge on my credit card. Application by fax or mail. (credit card payment form required)

Permission is hereby granted to enter the premises and make all inspections

Applicant Name (Print)	
Applicant Signature	Date:

*Office Use*

Approval to Issue Permit	Date:
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